MAXIMUS Corporate Overview

Prepared for:
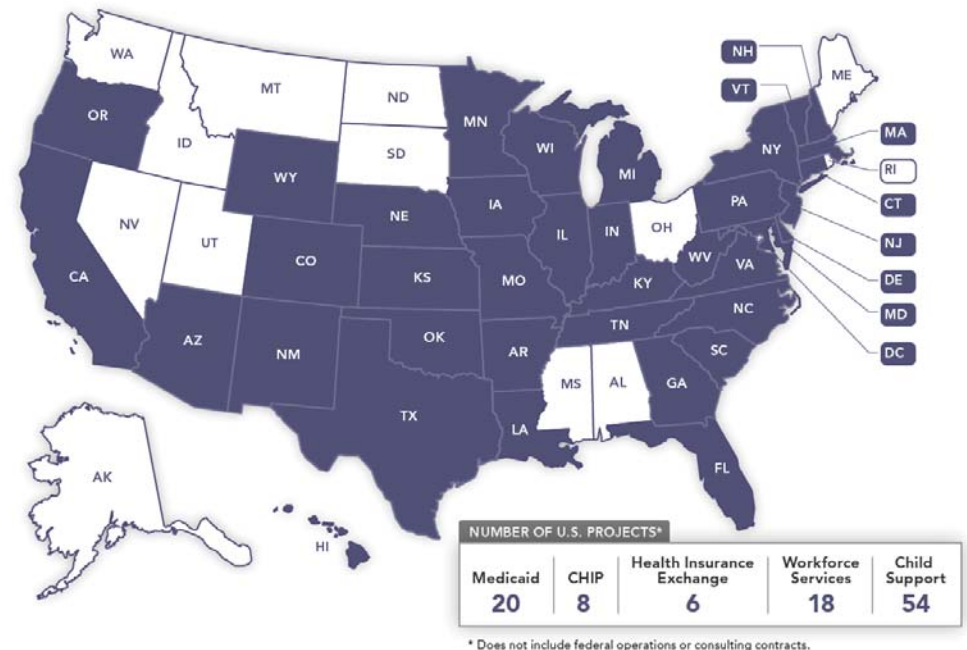
Trent Harkrader & Jodie Griffin

July 24, 2105

MAXIMUS®
HELPING GOVERNMENT SERVE THE PEOPLE®

Established Government Social Programs Partner

- Founded in 1975 and headquartered in Reston, Virginia

- Approximately 16,000 employees across the United States, Australia, Canada, New Zealand, Saudi Arabia and the United Kingdom

- Current and past clients include:
  - More than 20 U.S. Federal agencies
  - Each of the 50 states
  - The District of Columbia and several territories
  - Every major U.S. city and county

- Independent, publicly traded company (NYSE:MMS), with annual revenue of $1.7 billion, healthy balance sheet and no conflict of interest

NUMBER OF U.S. PROJECTS*

Medicaid	CHIP	Health Insurance Exchange	Workforce Services	Child Support
20	8	6	18	54

* Does not include federal operations or consulting contracts.

100+ Contracts with Contact Center Components

Canada (3 Provinces)

5 British Columbia **1** Ontario **1** Prince Edward Island

United States (37 States + D.C.)

1 Arkansas	**2** Kansas	**4** North Carolina
1 Arizona	**1** Kentucky	**1** Oklahoma
7 California	**3** Louisiana	**1** Oregon
4 Colorado	**4** Maryland	**3** Pennsylvania
1 Connecticut	**1** Massachusetts	**3** South Carolina
1 Delaware	**3** Michigan	**7** Tennessee
1 District of Columbia	**3** Minnesota	**4** Texas
1 Florida	**2** Missouri	**1** Vermont
4 Georgia	**1** Nebraska	**2** Virginia
1 Hawai'i	**1** New Hampshire	**2** West Virginia
3 Illinois	**5** New Jersey	**1** Wisconsin
2 Indiana	**1** New Mexico	**1** Wyoming
3 Iowa	**4** New York	

Nationwide (U.S.)

Federal Marketplace Customer Contact Center

Federal Marketplace Eligibility Appeals (2 locations)

Federal Services Health Appeals (5 locations)

Tax Credit and Employer Services

Ticket to Work Program

Services Overview

1 out of 2 Medicaid managed care beneficiaries served by MAXIMUS

6 state-based health insurance exchange contact centers operated by MAXIMUS

.04% error rate for eligibility and enrollment services for a large CHIP operation

30+ years experience in helping agencies address difficult managerial, operational & technical challenges

Core Services

- Outreach & Education
- Eligibility
- Enrollment
- Customer Contact Centers
- Beneficiary Services & Provider Services
- Conflict-Free Assessments
- Premium Assistance
- Appeals & Independent Medical Review

Program Operations

- Health Insurance Exchanges
- Medicaid & CHIP
- Medicare
- Dual Eligibles
- Long-Term Services & Supports
- Health Insurance British Columbia
- U.K. Fit for Work
- U.K. Health Assessment Advisory Service

- TANF & WIOA case management
- SNAP education & training
- Disability employment services
- Tax credit & employer services
- SSI advocacy & eligibility assistance
- Child support enforcement
- New hire reporting

# Full-Service Provider for U.S. Federal Agencies

Mission Focused

To be a responsible steward for government programs, helping the government deliver on its promises with focus on outcomes.

Conflict Free

A truly independent, technology-neutral services provider, ensuring our clients and partners of our objectivity.

Outcomes Based

Every service tailored to project requirements, with results measured in terms of desired outcomes and presented through accurate reporting.

MAXIMUS Federal

MAXIMUS

Helping Government Serve the People®
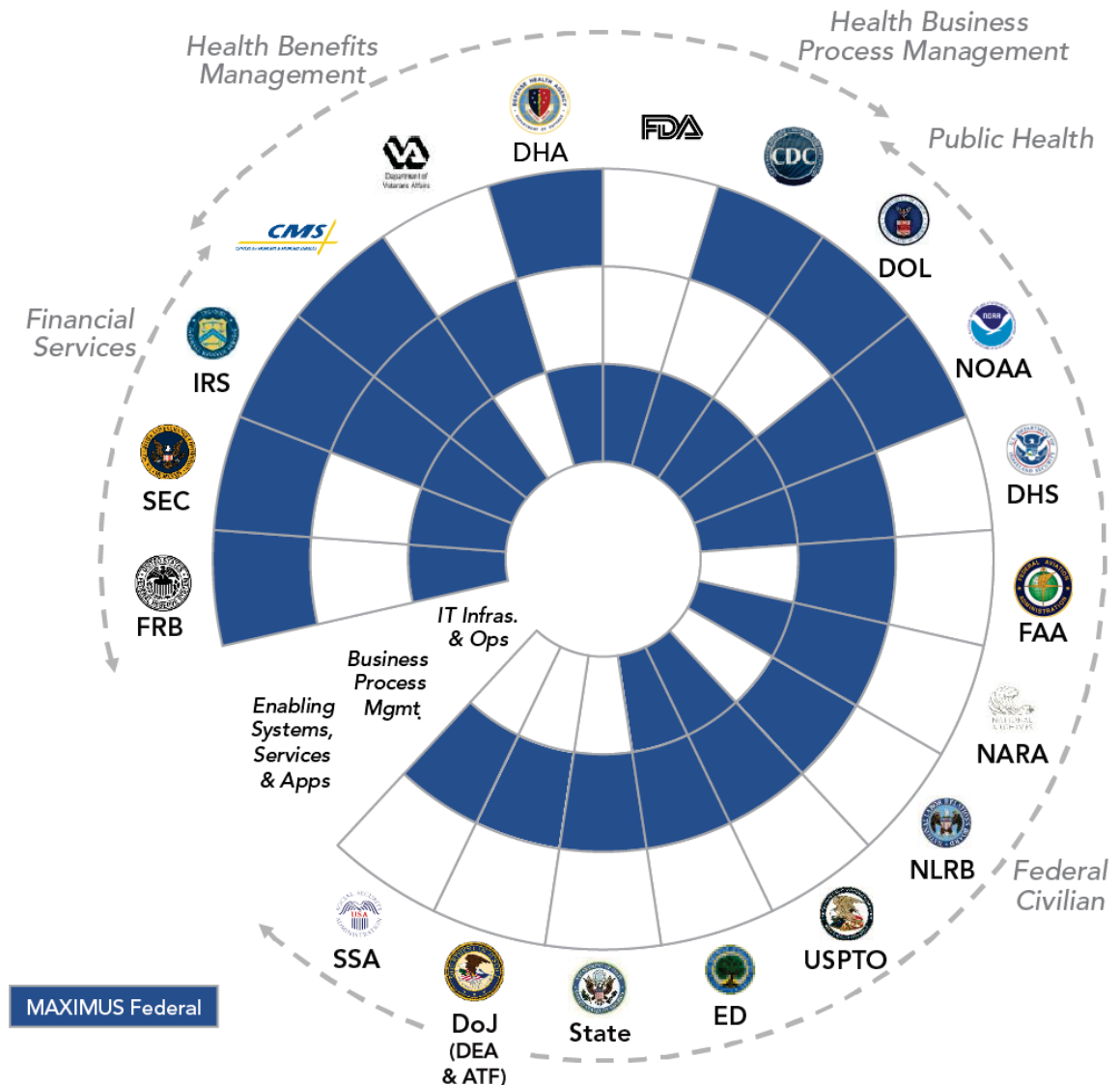
Eligibility & Enrollment

Helping States Achieve Program Outcomes

|	
MASSACHUSETTS The Spirit of America	• Answered 60% of calls directed to local **MassHealth** Enrollment Centers (MEC) through effective call triage and intelligent IVR • Decreased the volume of MEC-directed calls in real time through Web-based call distribution; refocused the workload of 100 state employees
MICHIGAN GREAT LAKES	• Increased **MIChild** enrollment by 17% through electronic interface to the eligibility system • More than 70% of MIChild applicants use interactive Internet application and receive an immediate eligibility decision
NEW YORK THE EMPIRE STATE	• Increased operational capacity and efficiency of the centralized, statewide **NY Enrollment Center** through mail-in, telephonic and electronic processing of applications and renewals
ILLINOIS Land of Lincoln	• Enhanced fraud prevention through income and data verification for the **Medicaid** population
TEXAS THE LONE STAR STATE	• Developed effective public-private partnership for application assistance and enrollment of **Medicaid**, **CHIP**, **TANF**, **SNAP**, **Women's Health Program** and **Perinatal Program** clients • Scheduled appointments with state workers for SNAP clients

Eligibility Criteria

Household
Size

Time
limits &
Sanctions

Income
Thresholds
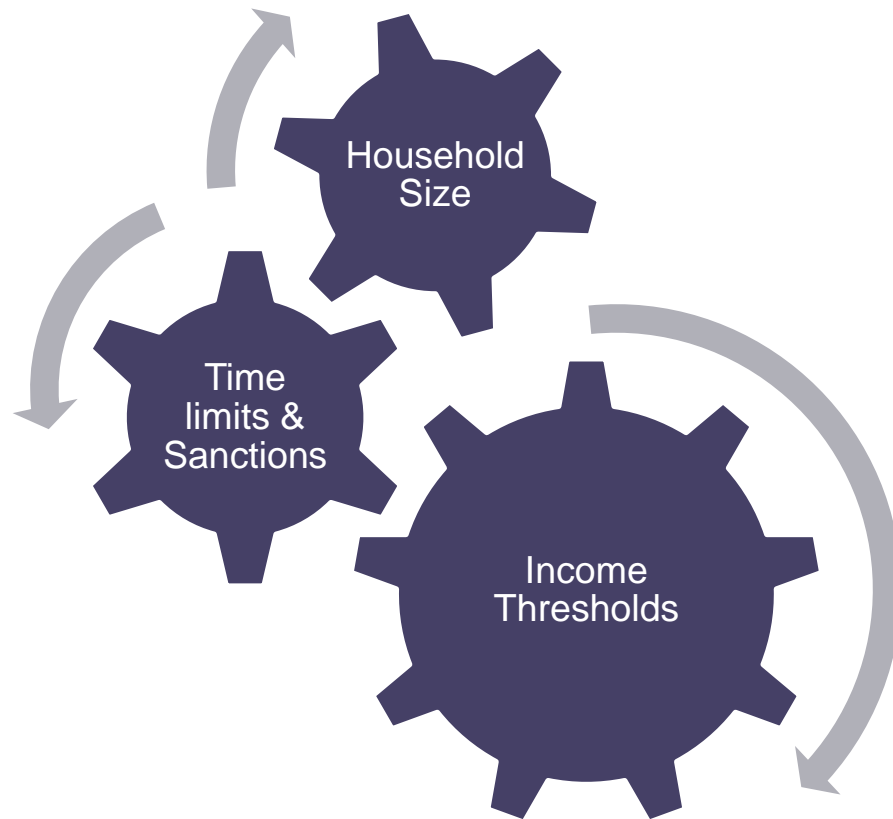
- Complex household rules
- Different validation & verification requirements
- Different data sets and data quality
- Different renewal and re-enrollment timeframe
- Differences in eligibility timing
- Differences in change of circumstance allowances

DecisionPoint™ for Program Integrity
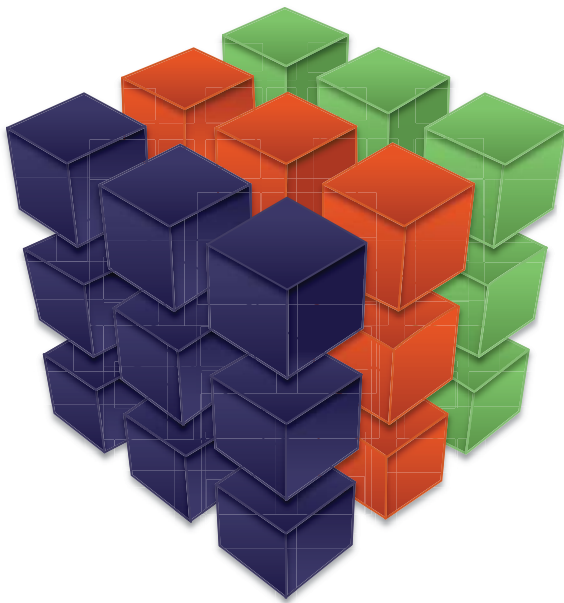
Platform
- Electronic data matching services to third party data sources
- Consolidates disparate data sources into a single screen view
- Provides "eligibility recommendations"
- Pre-integrated capabilities:
  › Workflow management
  › Missing information management
  › Letter generation and mailhouse support
  › Document management
  › Reporting

Services
- Scalable business and technical services for:
  › Eligibility redetermination
  › Ongoing eligibility verification
  › Post eligibility determination review
- Call center services available to respond to member inquiries

Benefits
- Increased accuracy of eligibility determinations
- Ensures individuals are in appropriate program or removed from programs, if ineligible
- Enables quick integration of new data sources into the eligibility determination and program integrity processes
- Provides a stand alone service and system to operate in parallel to ongoing operations requiring no integration

Access to trusted data
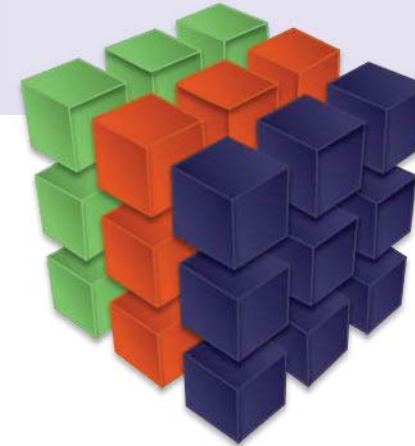
Federal Data Sources	State Data Sources
SSA – Bendex: Provides SSA and SSI income information, SSN verification, and reports of deceased customers	**Unemployment Benefits:** Provides State unemployment benefits information
WTPY: Provides citizenship information	**Wage:** Provides wage information from all State employers
PARIS Interstate File: Provides information on clients/households receiving benefits in another state	**Public Health:** Provides birth and death records from State hospitals
PARIS Veterans File: Provides information on veterans receiving benefits	**Tax:** Provides 12-month State tax information
	New Hire: Provides information on new hires reported by all State employers

The Potential of Commercial: Verifying Eligibility through Third Party Data Brokers

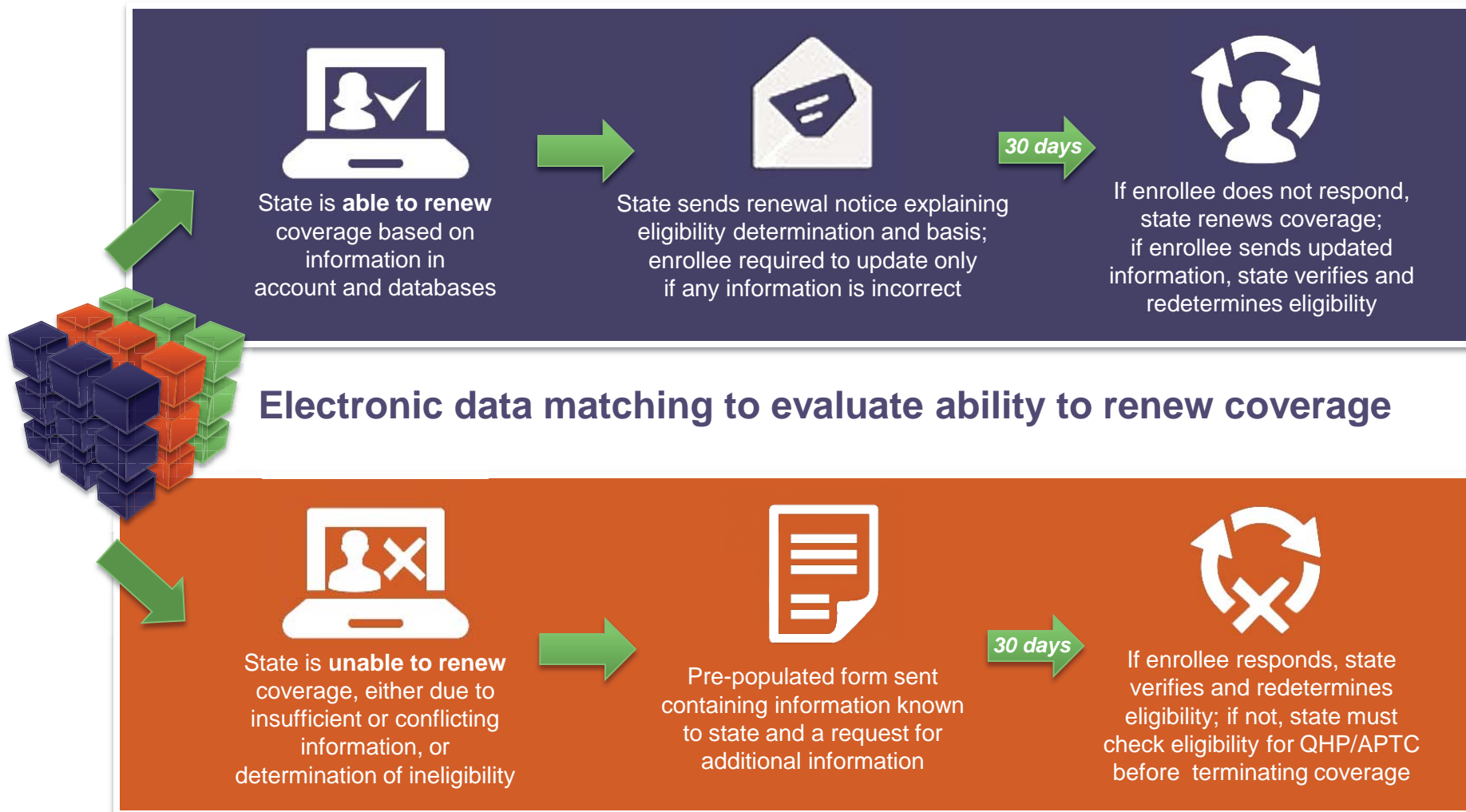Commercial data brokers offer a wealth of information

- Build one adapter → Access thousands of individual data sources
- Data collected is more up-to-date and accurate than many State or Federal sources
- Real-time results facilitate a more efficient eligibility verification process
- Let the data alert YOU to potential changes in a member's eligibility status

What can be verified through commercial data sources?

Eligibility Factor Verified	
Positive Identity: Verify attributes like SSN or address are legitimate and correctly associated with the member	**Assets:** Provide real property, title registration, and neighborhood-level demand deposit accounts information for members to detect potential cases of fraud
State Residency: Validate member is a State resident, and monitor members for changes from in-state to out-of-state addresses	**Incarceration:** Verify if member is currently incarcerated, and monitor members for changes in incarceration status
Income: Enhance member income eligibility profiles through access to paystub-level income information from sources like The Work Number	**Death:** Verify if member is deceased, and monitor members for appearance on the Death Master Index

MAXIMUS

Helping Government Serve the People®

DecisionPoint – Medicaid Passive Renewal Process

State is **able to renew** coverage based on information in account and databases

State sends renewal notice explaining eligibility determination and basis; enrollee required to update only if any information is incorrect

30 days

If enrollee does not respond, state renews coverage; if enrollee sends updated information, state verifies and redetermines eligibility

Electronic data matching to evaluate ability to renew coverage

State is **unable to renew** coverage, either due to insufficient or conflicting information, or determination of ineligibility

Pre-populated form sent containing information known to state and a request for additional information

30 days

If enrollee responds, state verifies and redetermines eligibility; if not, state must check eligibility for QHP/APTC before terminating coverage

Source: Manatt 2014

Helping Government Serve the People®

DecisionPoint – Ongoing Eligibility Verification

State determines eligibility and enrolls into program

MAXIMUS performs ongoing program integrity to ensure that consumers are appropriately placed in correct programs

Program participants are reassigned to correct programs based on most current eligibility

State does not rely on self-reporting alone to identify changes

Consumers remain in assigned program

Consumers are redirected to FFM for APTC / Tax Credit eligibility **saving Medicaid costs for state**

Consumers are dis-enrolled from program (found to be collecting out of state benefits or have passed away), **saving Medicaid costs for state**

DecisionPoint – Post Eligibility Reviews

State determines eligibility and enrolls into program

MAXIMUS performs eligibility reviews a predetermined interval after initial determination for the purpose of error or fraud

Participant eligibility is verified through third party data sources

Participants found to be incorrectly determined for Medicaid eligibility but eligible for another program are reassigned to that program, **saving Medicaid costs for state**

Participants found to be receiving benefits in another state or who are found to be deceased are flagged as potentially fraudulent enrollees, **saving the State program costs**
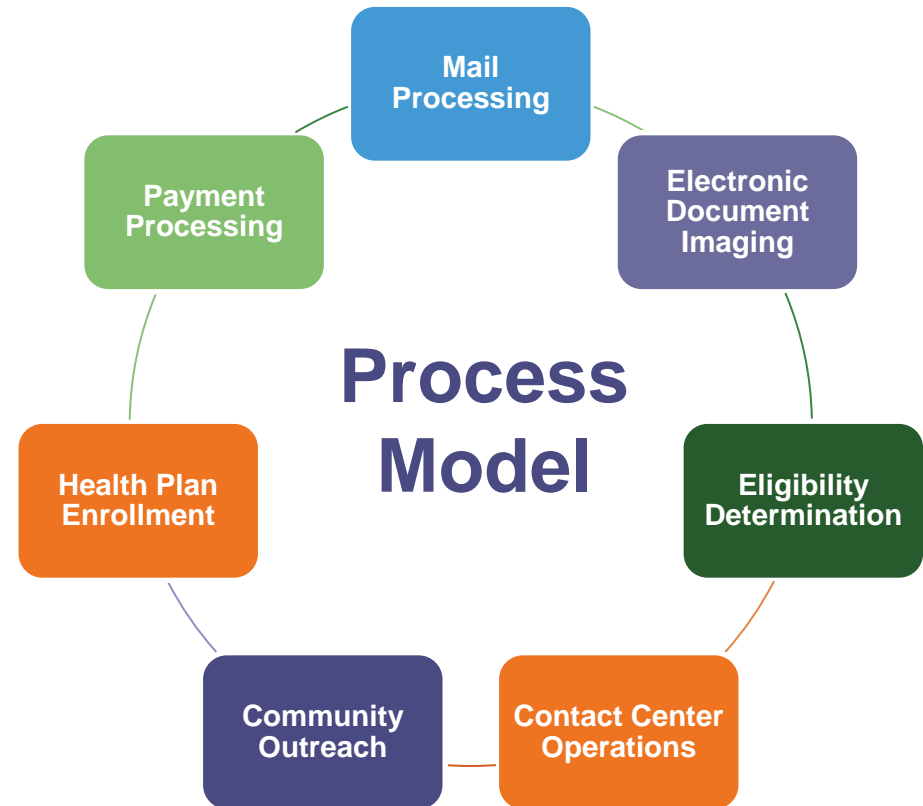
Getting It Right The First Time

- Operational framework for business process improvement
    - Repeatable processes to reduce errors & increase efficiencies
    - Real-time management & reporting

- Task-based centralization of administrative processes
    - Customer service
    - Mail processing
    - Eligibility determinations
    - Health plan & PCP enrollment
    - Premium processing
    - Provider credentialing & enrollment

- Greater management control, accountability & transparency

- Cost-effective application of information technology (i.e., imaging & electronic task management)

Process Model

- Mail Processing
- Electronic Document Imaging
- Eligibility Determination
- Contact Center Operations
- Community Outreach
- Health Plan Enrollment
- Payment Processing

A Commitment to Quality

- Real-time reporting solution
- Business process modeling
- Client and consumer satisfaction surveys
- Knowledge management systems
- Three-tier risk management strategy
- Redundant disaster recovery and business continuity plans
- Workforce management
- HIPAA compliance and privacy protection

- Thirteen operations recognized as Contact Centers of Excellence by BenchmarkPortal
- Twelve ISO 9001:2008 certified operations
- Two ISO 27001 certified and SEQOHS accredited operations
- Certified CMMI Level 3

A Proven Partner for Government

✓ Core focus on providing health and human services through public-private partnerships

✓ Excellent reputation as prime integrator and strategic partner

✓ Extensive program knowledge and operational vision to help governments achieve new efficiencies and enhanced outcomes

✓ Independent with no conflict of interest and no contracts with health plans or health care providers

✓ Strong history of building and successfully operating project management offices

✓ Relationships with local community-based and non-governmental organizations

✓ Successful operation of performance-driven programs:
– Local hiring and workforce development
– Policy implementation, as determined by our clients
– Rapid deployment of flexible and scalable operations
– Achievement of critical program outcomes